

MAINE STATE LEGISLATURE

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132nd MAINE LEGISLATURE

SECOND REGULAR SESSION-2026

Legislative Document

No. 2133

S.P. 830

In Senate, January 7, 2026

An Act Regarding Licensing of Community Paramedicine Services and Clinicians

Submitted by the Department of Public Safety pursuant to Joint Rule 203.
Reference to the Committee on Criminal Justice and Public Safety suggested and ordered
printed.

A handwritten signature in black ink, appearing to read "D M Grant", is positioned above the printed name of the Secretary of the Senate.

DAREK M. GRANT
Secretary of the Senate

Presented by Senator BAILEY of York.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §2147, sub-§15**, as corrected by RR 2023, c. 2, Pt. A, §30, is
3 amended to read:

4 **15. ~~Emergency medical services community~~ Community paramedicine services.**
5 ~~Ambulance services and nontransporting emergency medical~~ Community paramedicine
6 ~~services as defined in Title 32, section 83, subsection 9-C and licensed under Title 32,~~
7 ~~chapter 2-B, that are authorized by the Emergency Medical Services' Board to provide~~
8 ~~community paramedicine services pursuant to Title 32, section 84, subsection 4. This~~
9 ~~exemption applies for the express and exclusive purpose of delivering community~~
10 ~~paramedicine services, as long as:~~

11 ~~A. The care is episodic. For the purposes of this paragraph, "episodic" means an~~
12 ~~encounter with a patient focused on presenting concerns and an identified medical~~
13 ~~condition in which neither the community paramedic nor the patient has the expectation~~
14 ~~of an ongoing general home care relationship; and~~

15 B. The Emergency Medical Services' Board adopts rules requiring authorized
16 community paramedicine services to:

- 17 (1) Comply with the Maine Background Check Center Act requirements as
18 described in chapter 1691;
19 (2) Conduct initial and ongoing training of all staff regarding their obligations as
20 mandatory reporters;
21 (3) Meet licensing standards consistent with those required by section 2145,
22 subsections 3 and 4; and
23 (4) Coordinate with home health agencies; and

24 **Sec. 2. 24-A MRSA §4303-F, sub-§1**, as amended by PL 2025, c. 34, §1 and
25 affected by §2, is further amended by amending the first blocked paragraph to read:

26 Notwithstanding this subsection, a carrier is not required to reimburse an ambulance service
27 provider at the reimbursement rates required in this subsection for covered services
28 delivered through community paramedicine in accordance with Title 32, section 84,
29 ~~subsection 4~~ §5-D and a carrier may require an ambulance service provider to obtain prior
30 authorization before providing services through community paramedicine.

31 **Sec. 3. 32 MRSA §82, sub-§1**, as amended by PL 2021, c. 220, §1, is further
32 amended to read:

33 **1. Licenses required.** An ambulance service, ambulance, nontransporting emergency
34 medical service, emergency medical services person, community paramedicine clinician,
35 community paramedicine service, emergency medical services ambulance operator,
36 emergency medical dispatch center or emergency medical dispatcher may not operate or
37 practice unless duly licensed by the ~~Emergency Medical Services' Board~~ board pursuant to
38 this chapter, except as stated in subsection 2.

39 **Sec. 4. 32 MRSA §83, sub-§9-A** is enacted to read:

40 **9-A. Community paramedicine.** "Community paramedicine" means the practice by
41 an emergency medical services provider, primarily in an out-of-hospital setting, of

1 providing episodic patient evaluation, advice and treatment directed at preventing or
2 improving a particular medical condition.

3 **Sec. 5. 32 MRSA §83, sub-§9-B** is enacted to read:

4 **9-B. Community paramedicine clinician.** "Community paramedicine clinician"
5 means an emergency medical services person licensed under this chapter who has
6 completed specialized education and training to operate in an expanded role, providing
7 episodic, proactive and preventive health care services in nonemergency settings.

8 **Sec. 6. 32 MRSA §83, sub-§9-C** is enacted to read:

9 **9-C. Community paramedicine service.** "Community paramedicine service" means
10 an ambulance service or other nontransporting emergency medical service licensed to
11 provide community paramedicine.

12 **Sec. 7. 32 MRSA §84, sub-§4,** as repealed and replaced by PL 2023, c. 195, §4, is
13 repealed.

14 **Sec. 8. 32 MRSA §85-C** is enacted to read:

15 **§85-C. Community paramedicine clinicians**

16 **1. License required.** A community paramedicine clinician must be licensed by the
17 board in accordance with rules adopted by the board.

18 **2. Minimum requirements for licensing.** In adopting rules for the licensure of
19 community paramedicine clinicians, the board shall ensure that a person is not licensed to
20 provide community paramedicine unless that person's qualifications are at least those
21 specified in this subsection.

22 A. The person has successfully completed training specified in rules adopted by the
23 board pursuant to the Maine Administrative Procedure Act.

24 B. The person has successfully demonstrated trustworthiness and competence to
25 engage in the practice of community paramedicine in such a manner as to safeguard
26 the interests of the public.

27 C. The person holds a separate license as an emergency medical services person.

28 Rules adopted pursuant to this section are routine technical rules as defined in Title 5,
29 chapter 375, subchapter 2-A.

30 **Sec. 9. 32 MRSA §85-D** is enacted to read:

31 **§85-D. Community paramedicine services**

32 **1. License required.** A community paramedicine service must be licensed and must
33 operate in accordance with rules and protocols adopted for services under this chapter.

34 **2. Mandatory qualifications.** The board shall adopt rules governing the
35 qualifications for and standards to be observed by community paramedicine services,
36 including:

37 A. The identification of a primary care medical director with whom the community
38 paramedicine service works;

39 B. The identification of an emergency medical services medical director;

1 C. Compliance with the Maine Background Check Center Act requirements as
2 described in Title 22, chapter 1691;

3 D. Conducting initial and ongoing training of all staff regarding their obligations as
4 mandatory reporters; and

5 E. Meeting licensing standards that address the following areas:

6 (1) General requirements;

7 (2) Qualifications for professional personnel;

8 (3) Qualifications for paraprofessional personnel;

9 (4) Treatment and services and their coordination;

10 (5) Organizational structure, including lines of authority;

11 (6) Treatment records;

12 (7) Business records; and

13 (8) Other aspects of community paramedicine that may be necessary to protect the
14 public.

15 Rules adopted pursuant to this section are routine technical rules as defined in Title 5,
16 chapter 375, subchapter 2-A.

17 SUMMARY

18 This bill defines "community paramedicine," "community paramedicine clinician" and
19 "community paramedicine service" and requires community paramedicine clinicians and
20 community paramedicine services to be licensed by the Emergency Medical Services'
21 Board. It establishes minimum requirements for licensure and directs the board to adopt
22 rules governing qualifications and standards.